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6th June 1969

Dear Sir,

I am a 21 year old Dental Student at Dundee University, and I am extremely interested in the subject of President Kennedy's Assassination. I have been baffled by the assassination for three years; before this I accepted the official version. At one stage I believed Oswald could not have done it alone but now I am not sure. I am unable to find a logical theory which explains the events of the assassination. I am trying to solve the many mysteries that puzzle me but I possess little knowledge of forensic pathology. I feel I must seek the opinions and advice of experienced forensic pathologists. That is the reason I am writing to you — I believe you possess the knowledge which could help me clear up the many puzzles in my mind.

I have prepared a number of questions I would like to ask you — I hope I am not being impertinent in asking you to answer the questions individually, but I have deliberately asked them in such a fashion so that I can learn more about the subject and perhaps clear up most, if not all, the questions that puzzle me. I realize there are a vast number of questions and several of them appear repetitive in nature but since I cannot converse with you this means of communication necessitates my asking a number of questions which are probably superfluous after your answers to previous questions but since I do not know your answers in advance I have to ask them.

I hope I have not assumed your having an intimate knowledge of the assassination if this is not the case, I have tried not to do so.

The "Warren Commission" reported that the shots were fired from above and behind and the bullets were full-jacketed (copper jacket - lead core) military rifle bullets. The muzzle velocity of the bullets was reported as being approximately 2,000 feet per second.

The posterior wound in the President's neck measured 7 x 4 mm. Do you regard this as unusual for a 6·5 mm. diameter bullet or is it the sort of wound (presumably of entry) that you would expect?

Are the positions of the wounds in the President's neck consistent with a downward path of 20° of a bullet from back to front? (The position of the back wound was around the level of the 1st thoracic vertebra, the anterior neck wound was at the level of the 3rd or 4th tracheal ring).

The posterior wound appears to have been above the level of the 1st rib but how do you reconcile this with the bullet holes in the coat and shirt (nearly six inches below the top of the collar)?

Is it possible that a bullet entered the back, stopped after penetrating only a short distance then worked its way out somehow?

The anterior wound appears to be small – about 5mm. diameter – do you not find this unusual for a bullet of this type making its exit? Would you not expect a bullet exiting at this point to create a larger more ragged wound after traversing the soft tissue especially after creating a ragged tear in the trachea?

Could a bullet exiting ~~it~~ with a low velocity account for the small size of the anterior wound?

The tear in the shirt in the anterior neck was a 1/2" vertical slit, is this consistent with an exiting bullet of this type, be it of high or low velocity?

Is the lack of metal traces on the edges of the anterior shirt tear and neck in the ~~knot~~ knot of the neck tie accounted for by a low velocity bullet? Would not a high velocity bullet have left metal traces as found at the edges of the posterior holes in the coat and shirt?

Do you feel that it is possible for the bullet to have traversed from front to back or would this have produced a posterior wound at a lower position and wounds of a different appearances?

Are the larger areas of contusion and haematomas around the trachea, larynx, and strap muscles adequately accounted for by a bullet path from back to front and exiting at about the level of the 3rd or 4th tracheal ring? Does this path also account for the contusions of the apex of the pleura and lung?

Could these vertical contusions of the larynx, trachea, and neck muscles be accounted for by a metal or bone fragment from the head shot? Similarly with the pleura and lung contusions?

What is your opinion on the theory that a fragment from the head shot caused the anterior wound? Would not a metal or bone fragment have created a visible hole in the bones of the floor of the cranial cavity and a path through from the for could it have escaped the searchings of the autopsy surgeons?

Are the vertical tears in the mid-brain adequately accounted for by the centre-core theory or could they have been caused by a metal or bone fragment?

The larger bullet wound in the head appears extensive (virtually all the parietal bone, and some of the occipital and frontal bones was missing), do you find this unusual for a bullet of this type or not? Is it possible that two bullets struck the head? Is it possible that a bullet struck from back to front, then a split second later a second bullet struck from right front going backwards? Can this double hit theory account for the extensive wound? Is it possible that the first bullet entered causing the small wound to the right of the external occipital protuberance exiting through the fronto-parietal region, and the second bullet entered straight into uncoagulated brain tissue and exited through the occipital or occipito-parietal region? In such a case is it possible that the second bullet might leave no metal fragments in the brain due to its not having entered through bone or skin but merely coursed through soft brain tissue? And if such were the case would the bullet retain a high velocity and if so what would be the resulting brain damage and appearance of the exit wound? Would it depend on the type of bullet used? What is your opinion on the Two shots to the head theory? - is there a possibility - is it consistent with the damage done?

Are the wounds consistent with a single back to front passage of a bullet of this type? If not, is a different type of bullet indicated, or how do you account for the wounds?

I am baffled by the President's reaction to the head shot. The Zapruder film shows a forward lurch which lasts for only about 1/20th of a second, followed by a more pronounced backward and left movement. Both movements are rapid. I would be interested to have your views on this. The forward movement was probably due to the impact of a bullet from back to front but the backward movement is a bit of a mystery. Could this backward movement have been a neuromuscular

reaction, perhaps due to the bullet having exploded away the right precentral gyrus thereby exciting nerve impulses which stimulated the muscles on the left side of the body to contract rapidly and thereby "threw" the President to the left? Give the body movements of the President consistent with the back to front trajectory? If not, what explanation can you give for the backwards movement?

Brain tissue and skull bone fragments were not only thrown forwards but also to the left and rear of the President — is this consistent with a back to front trajectory? Does the fragmenting of the bullet account for this — does the bullet fragment in such a manner as to send fragments in all directions?

Turning now to Governor Connally's wounds.

The entry wound in his back was 3 cms long — is this accounted for by a bullet entering at a very shallow angle? No fibres of clothing were found in the back wound, is this consistent with a pristine bullet or one which is yawing?

Is the wrist damage (fractured radius), fibres of clothing found in the wound, and the Median nerve intact) consistent with a pristine bullet, a tumbling bullet, a distorted bullet, a bullet fragment, or what? What sort of velocity of bullet is indicated, high or low?

And the thigh wound, what is your opinion as to the cause of this — a low velocity bullet, a fragment striking tangentially or what? Could the bullet have fragmented after striking the wrist and a fragment caused the thigh wound?

Is it possible for the bullet which struck Governor Connally to have fragmented and a fragment have sufficient velocity to have left the car and struck the nearby curb leaving a discernible mark?

Is it possible for a fragment of the head shot to have caused any of Gov. Connally's wounds?

What is your opinion on Gov. Connally's wounds? — Do you think they were caused by one, two,

or three bullets, and what is your opinion on the bullet's path, with regard to deformity, velocity, tumbling, and fragmenting of the bullet?

Do you believe the recently produced bullet, Commission Exhibit 399, could have caused all or any of Gov. Connally's wounds? Do you believe it could have caused President Kennedy's neck wounds and Gov Connally's wounds? Do you believe it could have caused President Kennedy's neck wounds alone?

Is it possible for a fragment from the shot that hit President Kennedy in the head to have retained sufficient velocity to travel 270 feet then strike the curb and cause a fragment to strike a bystander? How do you account for this bullet strike on the curb such a distance away from the Presidential limousine?

I am a little puzzled as to what exactly makes a bullet of this type fragment – is it the impact on hard tissue or is it something else? Does the bullet fragment upon hitting bone? For example, upon entering ~~of~~ into the skull did the bullet fragment due to hitting the bone on entry, ~~and~~ then further fragment on exiting through bone?

Is it typical of a bullet of this type to fragment on hitting hard tissue? - If so, do you believe Commission Exhibit 399 ever struck any hard tissue? Can you account for the apparent opposite reactions of similar bullets to striking hard tissue? (– the head shot bullet fragmented; Comm. Exhibit 399, which supposedly caused Gov. Connally's wounds, did not fragment or distort).

Would there not have been more in the way of distortion to Comm. Exhibit 399 had it struck hard tissue? Does a bullet of this type usually distort on impact with hard tissue?

I would be interested to hear how you account for the condition of C.E. 399, and, if I have not already covered it in my questions, I would be interested to hear your opinion on the events of the assassination with regard to bullets fired, damage done etc. Do you believe President Kennedy and Gov. Connally could have been struck by a single bullet, taking into account Gov. Connally's testimony and his reaction to being hit apparently over a second

after President Kennedy's reaction to being hit?

As I have said, I would be interested to hear your opinion as to the events of the assassination and your reasons for your beliefs. I hope I have not asked too many questions, and that I have not asked you to engage in too much speculation. I am truly baffled by the assassination — I feel I should know the answers to all the questions I have asked you before I can start to understand. I believe you have the knowledge to answer these questions and I could not begin to thank you enough if you were to answer them. I look forward to hearing from you and I thank you very much.

Yours faithfully,

C. Longbottom

(MR C. LONGBOTTOM)